Students enrolled at the University of Pikeville who wish to take a course at another accredited institution for credit toward a University of Pikeville degree must complete the Permission to Study Off-Campus form prior to enrolling in the course. Once the approved course is completed with a grade of “C” or better, the student must submit an official transcript showing the completed course before it can be used to meet a University of Pikeville degree requirement. Repeating a course at another institution will not change the grade received at the University of Pikeville for the same course. Students wishing to take courses off-campus while taking courses at the University of Pikeville will be limited to a combined load of 18 hours for the fall and spring terms and seven hours for summer terms. Students on probation will not be allowed to enroll in off-campus courses while taking courses at the University of Pikeville.

Student’s Name________________________ Classification__________________________

ID #_________________ Telephone______________________________________________

E-mail Address_____________________________________________________________

Major(s)________________________ Minor (if applicable) _______________________

Total # of Hours Earned_____ Grade Point Average_____ Expected Graduation Date________

Year & Term Requesting to Study Off-Campus________________________________________

Name of Institution____________________________________________________________

<table>
<thead>
<tr>
<th>Course(s) Which Permission Is Requested</th>
<th>University of Pikeville Equivalent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Department</td>
<td>Course Number</td>
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</table>

Is/are the above course(s) required in the major? ____Yes  ____No

Reason for Request______________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

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_____________________________________________________________________________

Student’s Signature _____________________________ Date __________________

Signatures needed for approval:

Advisor __________________________________ Date ______________

Registrar or Dean _______________ Date ______________

Revised July 2013